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PTO/SB/01 (6-95)

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	U 0112 OC/OCPT
	First Named Inventor	AHTING, Herbert
	COMPLETE IF KNOWN	
	Application Number	10/185,464
	Filing Date	06/27/2002
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:
My residence, post office address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS FOR PRODUCING GLYCERIN
(Title of the Invention)

the specification of which
☒ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **06/27/2002** as United States Application Number or PCT International Application Number **10/185,464** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority	Certified Copy Attached?	
			Not Claimed	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
60/309,250	07/31/2001	<input type="checkbox"/>

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DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name OR Customer Number or label

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach	32,891	Aaron R. Ettelman	42,516
Steven J. Trzaska	36,296	Henry E. Millson, Jr.	18,980

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label **23657** OR ☒ Fill in correspondence address below

Name	John E. Drach				
Address					
Address					
City		State		Zip	
Country		Telephone	610-278-4925	Fax	610-278-4971

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.


Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Herbert	Middle Initial	C.	Family Name	Ahting	Suffix e.g. Jr.	
Inventor's Signature	<i>Herbert C. Ahting</i>				Date	9-6-02	
Residence: City	Cincinnati	State	OH	Country	USA	Citizenship	USA
Post Office Address	7737 Stonehill Drive						
Post Office Address							
City	Cincinnati	State	OH	Zip	45255	Country	USA
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

(+) inside this box +

U 0112 OC/OCPT

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet									
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		David			Middle Initial		A.		Family Name		Krabacher			Suffix e.g. Jr.					
Inventor's Signature												Date		9/2/02					
Residence: City		Fairfield			State		OH		Country		USA			Citizenship		USA			
Post Office Address		49 Carousel Circle																	
Post Office Address																			
City		Fairfield			State		OH		Zip		45014		Country		USA				
																Applicant Authority			
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name					Middle Initial				Family Name					Suffix e.g. Jr.					
Inventor's Signature												Date							
Residence: City					State				Country					Citizenship					
Post Office Address																			
Post Office Address																			
City					State				Zip				Country						
																Applicant Authority			
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name					Middle Initial				Family Name					Suffix e.g. Jr.					
Inventor's Signature												Date							
Residence: City					State				Country					Citizenship					
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Given Name					Middle Initial				Family Name					Suffix e.g. Jr.					
Inventor's Signature												Date							
Residence: City					State				Country					Citizenship					
Post Office Address																			
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Given Name					Middle Initial				Family Name					Suffix e.g. Jr.					
Inventor's Signature												Date							
Residence: City					State				Country					Citizenship					
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<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto																			

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Rose A. Stowe Rose A. Stowe
(SIGNATURE)

October 4, 2002
(DATE OF SIGNATURE)